

Forty-sixth Annual Report

OF

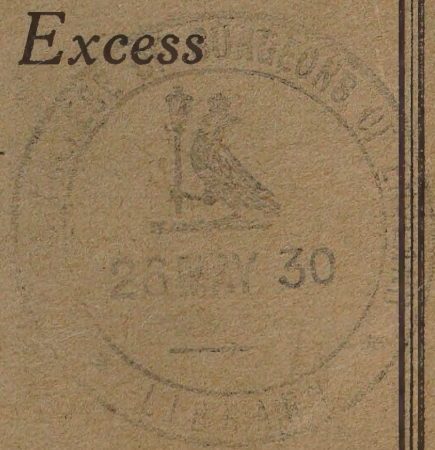
DALRYMPLE HOUSE

RICKMANSWORTH

HERTS.

*For the treatment of Male
Patients suffering from
Alcohol or Drug Excess*

1929-30



WELLCOME

LIBRARY

Ann Rec

WM28

.BC5

D15

1929-30

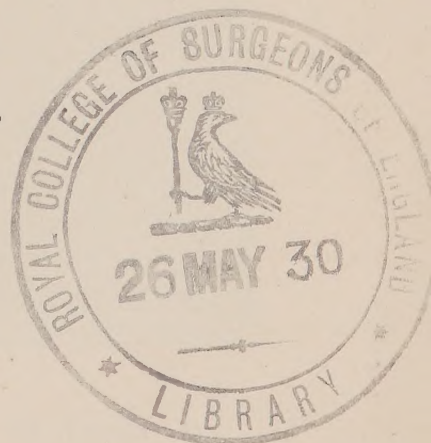
DALRYMPLE HOUSE RICKMANSWORTH HERTS.

FORTY - SIXTH ANNUAL REPORT

(Adopted and ordered to be printed at the Annual General Meeting of the Homes for Inebriates Association, held at 8 St. James Square, London, S.W., on Monday, 3rd March, 1930)



1929 - 30



Founded in 1883 under the auspices of

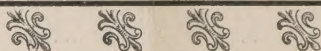
President :

EARL OF SHAFTESBURY, K.G.

Vice-Presidents :

THE ARCHBISHOP OF CANTERBURY
THE ARCHBISHOP OF YORK
THE BISHOP OF CARLISLE
THE BISHOP OF DURHAM
THE BISHOP OF GLOUCESTER
THE BISHOP OF HEREFORD
THE BISHOP OF LONDON
THE BISHOP OF NEWCASTLE
THE BISHOP OF NORWICH
THE BISHOP OF ROCHESTER
THE BISHOP OF ST. DAVIDS
THE BISHOP OF WINCHESTER
BISHOP ABRAHAM
THE DEAN OF YORK
THE DEAN OF LICHFIELD
REV. CANON ELLISON, M.A.
REV. CANON HOPKINS, B.D.
REV. DAWSON BURNS, D.D., F.S.S.
REV. DONALD FRASER, D.D.
LORD ABERDARE

J. BARLOW, J.P., Bolton.
C. CAMERON, M.D., M.P.
SIR W. T. CHARLEY, Q.C.
SIR ANDREW CLARK, Bart., M.D.
J. J. COLMAN, M.P.
J. P. CORRY, M.P.
J. COWEN, M.P.
C. DALRYMPLE, M.P.
LORD DERWENT
DR. FARQUHARSON, M.P.
W. HOLMS, M.P.
J. HOWARD, M.P.
E. STAFFORD HOWARD, M.P.
GEORGE PALMER, M.P.
ARTHUR PEASE, M.P.
SIR J. W. PEASE, Bart., M.P.
THE DUKE OF WESTMINSTER.
DR. B. W. RICHARDSON, F.R.S.
SIR HENRY THOMPSON, F.R.C.S.
SIR SPENCER WELLS, Bart., F.R.C.S.



Committee of Management :

Chairman : T. M. V. VAUGHAN RODERICK

J. SWINFORD FRANCIS
F. A. STRIKE
H. LANGFORD LEWIS

E. O. SAVIGNY
F. A. M. VINCENT, C.I.E., C.B.E.,
M.V.O.

Resident Medical Superintendent :

DR. F. S. D. HOGG

THE CEDARS, RICKMANSWORTH

TELEPHONE - 16 RICKMANSWORTH

Honorary Solicitor :

J. SWINFORD FRANCIS

Audit Committee :

H. LANGFORD LEWIS

F. A. STRIKE

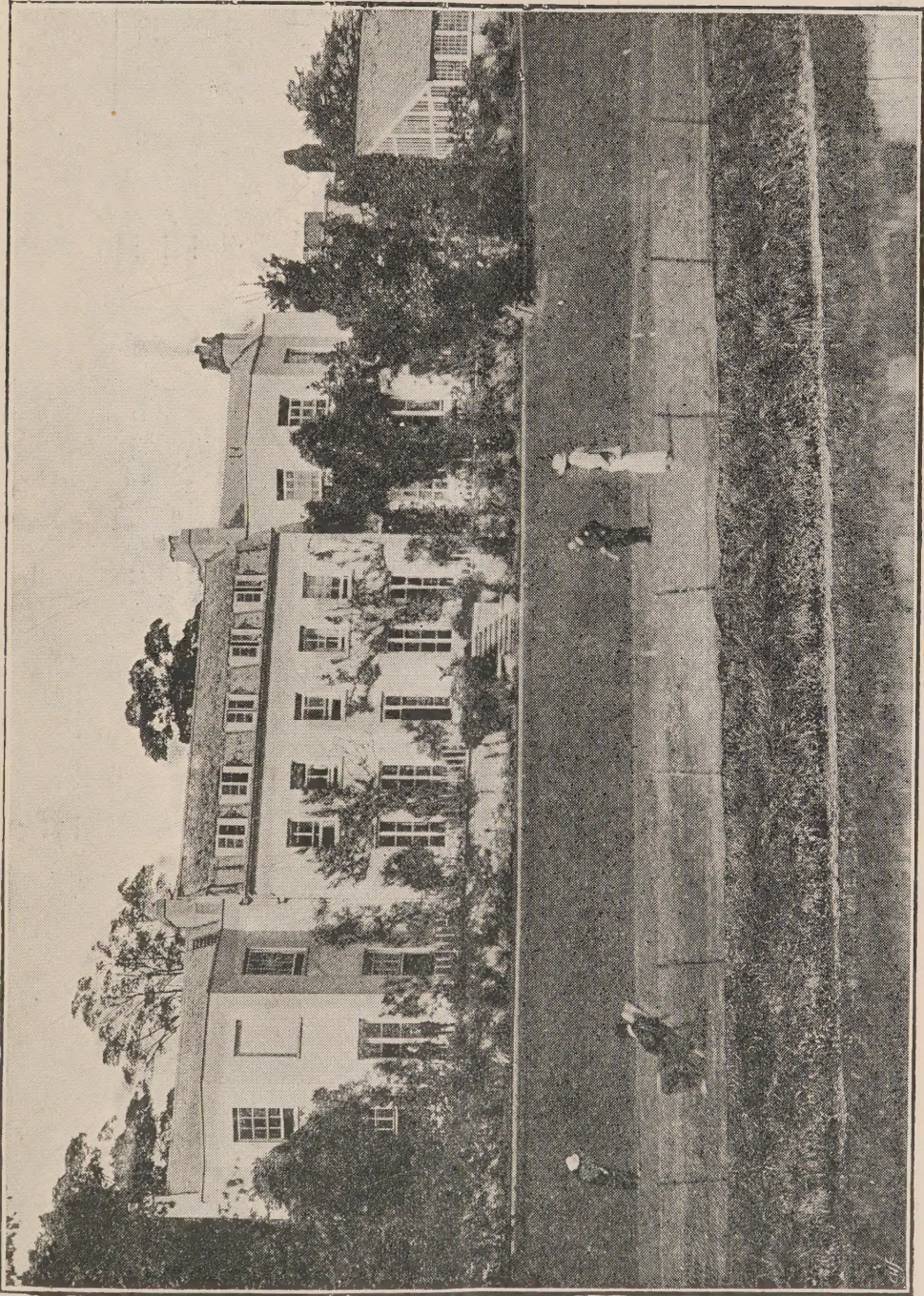
Auditors :

R. BARLOW TYLER, F.C.A.

F. A. STRIKE

Secretary :

J. SWINFORD FRANCIS, 173 MARYLEBONE ROAD, N.W.1.



DALRYMPLE HOUSE, RICKMANSWORTH, HERTFORDSHIRE.

THE HOMES FOR INEBRIATES ASSOCIATION.

BALANCE SHEET AT 31st JANUARY, 1930.

LIABILITIES.				ASSETS.			
	£	s.	d.	£	s.	d.	£
To Donations and Subscriptions :—				By Dalrymple House :—			£
Balance at 1st Feb., 1929	3879	9	11	Balance at 31st Jan., 1929	4902	5	10
Add Received during year ...	3	0	0	Improvements :—			
				Balance at 1st Feb., 1929	380	9	2
Patients' Fees received in advance	3882	9	11	Less Depreciation at			
" Sundry Creditors ...	24	6	0	5% per annum	19	0	5
" Reserve for House Repairs ...	475	12	8		361	8	9
" Dalrymple House Account :—							5263
Balance at 1st Feb., 1929	3001	16	2	Furniture and Utensils :—			
Add Surplus for year ending				Balance at 1st Feb., 1929	847	19	7
31st Jan., 1930 ...	89	15	5	Less Depreciation at 10% p.a.	84	15	11
							763
				Sundry Debtors :—			
				Patients' Fees Prepaid ...	36	6	0
				Expenses paid in advance ...	20	8	6
				Stock in hand :—			
				General Stock ...	87	3	0
				Poultry ...	31	10	0
				Investments :—			
				£500 3½% Conversion Loan at Cost			
							118
				Cash :—			13
				Deposit A/c, Rickmansworth	550	0	0
				Current "	474	18	11
				In Hand	86	6	7
				Current A/c, London	34	15	5
							1146
							0
							11
							£7724
							0
							2

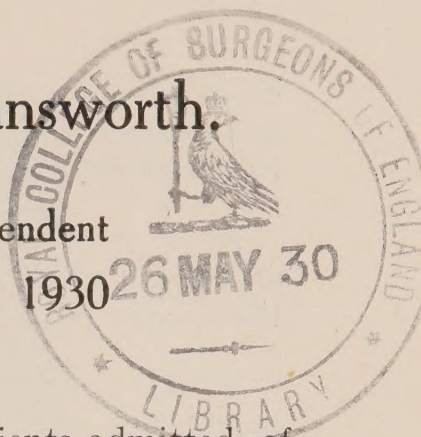
I have audited the Books and Accounts of The Homes for Inebriates Association for the year ending 31st January, 1930, and certify same to be correct. In my opinion the above Balance Sheet is properly drawn up so as to exhibit a true and correct view of the state of the Association's affairs according to the best of my information and the explanations given me and as shown by the Books.

27th February, 1930.

(Signed) R. BARLOW TYLER, Chartered Accountant 86-88 Queen Victoria St., London, E.C.4

Dalrymple House, Rickmansworth.

Report of the Medical Superintendent for the Year ending 31st January, 1930



GENTLEMEN,

During the past year there have been 105 patients admitted, of these, 5 placed themselves under the provisions of the Inebriates Act; the remaining 100, referred to as "Private patients," entered without any legal formality.

A large majority came for treatment for alcoholism only, there were two who had a drug habit (one opium and the other morphine) in addition to alcohol abuse: and there were 5 who were drug addicts without any drink complication: of these one took Heroin and the remainder Morphine.

One of the last group was admitted here under my care 24 years ago; at that time he was a young man who had no desire to be cured and made no attempt therefore to assist in his cure, and I discharged him as unsuitable. He has since then continued his habit, although he had been under treatments in various parts of the world, including a prison in this country where, so he stated, he was able to obtain drug supplies, I readmitted him as he appeared to be most anxious to get rid of his habit, and this was effected in a few weeks' time.

The Heroin addict remained here only a few days, urgent private affairs necessitated his return to his home. The remaining Morphine cases were weaned from the drug in one to three weeks without difficulty.

Among the Alcoholics, although of course many were ill on arrival, they, as is usually the case, rapidly recovered and remained in good health. There were no cases during the year of subsequent serious illness, though one who was suffering from Duodenal ulcer was still on a restricted diet on his discharge. Four were in Delirium Tremens on admission, they all recovered. One on admission was found to be suffering from a very serious heart affection, as he required day and night nursing and could not afford the expense of special nurses, he returned to his home a few days later. One man had been my patient here 30 years previously and until a short time before admission had abstained from alcohol. As he came to me soon after his relapse, quite a brief period of treatment was sufficient to put him on his feet again. One who is

included as an admission cannot be classed as a patient, but as an ex-patient. Being a bachelor, and having no home or ties, he likes to spend his holidays here.

As in past years, there have been former patients readmitted and many who have undergone various cures at home, or in institutions, have been received.

When the cause of relapse or failure has not been due to an insufficient period of treatment, it has been very frequently the result of over-confidence and the belief, or hope, that liquor can be taken in moderation, that one drink won't hurt, or that all will go well if spirits are avoided. I try to impress on all patients that those who have reached a condition necessitating their seeking treatment here can never take any alcoholic liquor with impunity. They *must* be total abstainers, and must avoid alcohol, just as the Diabetic has to avoid sugar. A negligible percentage of such persons are able to take beer or wine without grave risk of a serious relapse.

There were 106 patients discharged, 100 were private patients, and 6 who had been under the Inebriates Act.

Two patients have been away on leave of absence under the Act; one is now discharged, the other has been for some months, and is still on leave, and is following his profession. As I receive very good reports about him, I do not anticipate there will be any necessity for him to be readmitted.

The average length of residence among those discharged, excluding one patient who had made this his home for about nine years, was six to seven weeks.

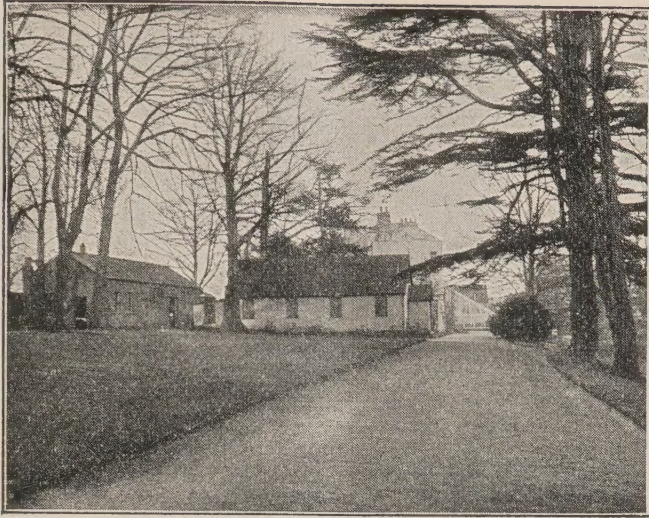
There have been a certain number who could only make a very short stay here: they were mostly professional or business men who considered it imperative that they should return to their various vocations at the earliest possible moment, and were unfortunately unable to give themselves a fair chance of recovery. As a consequence some have been readmitted during the year.

In an appendix I place, as usual, a table showing the year's admissions and discharges, and I include from my report for the year 1918-19 some particulars concerning a number of those discharged.

I am, Gentlemen,

Your obedient Servant,

F. S. D. HOGG.



CONCERT ROOM.



ISLAND AND BOATHOUSE.



EAST VIEW FROM ISLAND.



VIEWS IN
GROUNDS.





VIEW OF THE HOUSE FROM THE ISLAND.

APPENDIX.

Some particulars concerning a group of patients consecutively discharged. Reprinted from the Report for the year 1918-19

Number of Patients :—

Under the Act ...	...	629
Private ...	...	1016
		<hr/> 1645

Term of Residence :—

12 months and longer ...	209
9 " " " ...	72
8 " " " ...	32
7 " " " ...	4
6 " " " ...	263
5 " " " ...	54
4 " " " ...	82
3 " " " ...	528
2 " " " ...	99
1½ " " " ...	53
1 month or less ...	249
	<hr/> 1645

Age :—Between 17 and 20 years	1
" 20 and 30 "	216
" 30 and 40 "	636
" 40 and 50 "	524
" 50 and 60 "	217
" 60 and 70 "	47
" 70 and 80 "	4
	<hr/> 1645

Average age of all Patients 37·8

Previous Residence of Patients :—

Africa (East) ...	...	3
Africa (South) ...	...	32
Africa (West) ...	...	1
America (Central) ...	...	2
America (South) ...	...	25
Australia ...	...	13
Borneo ...	...	1
Canada ...	...	20
Channel Isles ...	...	9
China ...	...	1
Egypt ...	...	4
England—London ...	...	493
Provincial ...	...	739
France ...	...	19
India, Ceylon, Burmah	...	3)
Italy ...	...	1
Ireland ...	...	93
Japan ...	...	4
Madagascar ...	...	1
New Zealand ...	...	8
Persia ...	...	1

Previous Residence

of Patients (Continued) :—

Russia ...	...	3
Scotland ...	...	83
Straits Settlements ...	...	6
Switzerland ...	...	3
United States ...	...	11
Wales ...	...	38
West Indies ...	...	1
		<hr/> 1645

Education :—

College ...	...	416
Good ...	...	1166
Elementary ...	...	63
		<hr/> 1645

Marriage :—

Married ...	...	856
Single ...	...	679
Widowed ...	...	110
		<hr/> 1645

Occupation :—

Accountants ...	...	19
Agents ...	...	8
Artists and Theatrical...	...	22
Architects ...	...	10
Auctioneers ...	...	4
Bankers ...	...	12
Barristers-at-Law ...	...	24
Builder ...	...	1
Cable Official ...	...	1
Caterer ...	...	1
Chemists ...	...	17
Civil Servants ...	...	35
Clerks ...	...	88
Clerks in Holy Orders...	...	35
Commercial Traveliers	...	19
Company Directors ...	...	4
Confectioners ...	...	7
Contractor ...	...	1
Corn Broker ...	...	1
Dentists...	...	7
Distillers, Brewers, &c.	...	36
Drapers ...	...	12
Engineers ...	...	63
Engravers ...	...	2
Farmers (Market		
Gardeners, &c.)	...	79
Garage Proprietor ...	...	1
Grocer ...	...	1
Horse Trainer ...	...	1
Hotel Proprietors ...	...	12

Occupation (Continued) :—

House Decorators ...	3
Jewellers ...	3
Journalist ...	21
Land & Commission Agents	7
Librarians ...	2
Manufacturers ...	82
Marine Merchant Service	14
Medical Practitioners ...	130
Merchants ...	178
Military Officers ...	91
Naturalists ...	2
Naval Officers ...	14
No occupation ...	380
Planters ...	14
Photographer ...	1
Professors of Music ...	9
Publishers ...	5
Railway Official ...	1
Rancher ...	1
Secretaries ...	3
Schoolmasters, Tutors, &c.	29
Ship Owners ...	5
Shopfitter ...	1
Solicitors ...	63
Stockbrokers ...	22
Students of Medicine ...	14
Students in Law ...	3
Surveyors ...	4
Tailors ...	8
Tea Traders ...	4
Tobacconists ...	2
Veterinary Surgeons ...	3
Underwriters ...	3

1645

Family History :—

Insanity or Inebriety	Inebriety
in about 11 per cent.	in about 50 per cent.

Temperament :—

Nervous... ..	993
Nervo-Sanguine ...	250
Passionate ...	33
Phlegmatic ...	113
Sanguine ...	256

1645

Associate Habits :—

Bromidia ...	2
Cannabis Indica ...	3
Chloral ...	16
Chloroform ...	1
Chlorobrom ...	1
Cocaine ...	26
Heroin ...	6
Morphia... ..	82
Morphia and Cocaine ...	21
Opium or Chlorodyne...	27

Associate Habits (Continued) :—

Paraldehyde ...	7
Sulphonal ...	6
Tobacco... ..	1518
Trional ...	4
Veronal ...	13

Drinking Habits :—

Regular ...	1104
Periodical ...	495

Frequency of Periods :—

Every week ...	8
" 2 weeks ...	12
" 3 " ...	20
" 4 " ...	47
" 6 " ...	10
" 2 months ...	39
" 3 " ...	16
" 4 " ...	3
" 12 " ...	3
Very irregular ...	338

496

Delirium Tremens :—

Patients who have had 1 attack	258
" " 2 attacks	119
" " 3 " "	26
" " 4 " "	6
" " 5 " "	2
" " 6 " "	5
" " 7 " "	1
" " 13 " "	12

429

Ordinary Habits :—

Described as Social ...	1570
" Solitary ...	75

1645

Kind of Inebriant used :—

Absinthe ...	2
All Spirits ...	264
Beer ...	44
Beer and Spirits ...	290
Brandy ...	56
Drugs without Alcohol	47
Gin ...	16
Whisky ...	611
Wine ...	40
Wine and Spirits ...	109
Various ...	166

1645

Average of time addicted in all cases : 9 years.

Previous Residence in other Similar Institutions :—

Once	267
Twice	123
Three times	35
Four times	12
Five times	7
Six times	7
Insane Asylum	14

Exciting Cause :—

Ill-health	187
Influence of occupation—	
Commercial travelling	14
Wine & Beer Merchants	33
Cattle Salesmen	2
Stock Exchange	2
Colonial Life	29
Army Life	19
Retail Corn Business	1
Rubber Works	1
Jobmaster	1
Journalists	9
Theatrical	2
Injury	31
Nervous Shock—	
War Service	34
Domestic trouble	133
Business worry	112
Fight with Madman	1
Financial loss	15
No occupation	52
Not assigned	80
Overwork	77
Rum Ration in Navy	1
Sexual excess	6
Sociability	802
Air Raids	1

1645

Complicating Diseases :—

Adenoids	1
Abductor (Laryngeal)	
Paralysis	1
Abscess of Antrum	3
Alcoholic Convulsions	17
Alcoholic Neuritis	77
Amblyopia	13
Amnesia	2
Anal Fistula	7
Ant: Poliomyelitis	3
Appendicitis	3
Asthma	23
Bronchitis (acute)	2
Bronchitis (chronic)	17
Cataract	1
Caries of Rib	1
Cellulitis	1
Cirrhosis of Liver	14
Colitis, Ulcerative	2
Congenital Tremors	2

Complicating Diseases (Cont.) :—

Constipation chronic	57
Cystitis	1
Delirium Tremens	7
Delusional Insanity	14
Dercum's Disease	1
Diabetes	11
Duodenal Ulcer	1
Dysentery (chronic)	2
Dyspepsia (chronic)	13
Eczema	8
Exophthalmic Goitre	2
Epilepsy	6
Floating Kidney	3
Fracture of Bones	4
Gall Bladder (Suppurating)	1
Gangrene	1
General Debility	56
General Paralysis	1
Glycosuria (Intermittent)	6
Gonorrhœa	13
Gout	21
Hæmorrhoids	16
Hemiplegia	5
Hernia	3
Hyperidrosis	1
Hypochondriasis	3
Hypothyroidism	3
Hysteria	6
Keratitis	1
Menière's Disease	5
Migraine	7
Morbus Cordis	47
Nasal Polypus	3
Œsophageal Stricture	1
Ozæna	1
Perforating Ulcer	1
Phlebitis	3
Phthisis	12
Pneumonia	4
Progressive Muscular Atrophy	1
Prostatitis (acute)	2
Pseudo Ataxy	2
Psoriasis	13
Pulmonary Thrombus	1
Pyelitis	1
Rectal Abscess	1
Remittent Fever	9
Renal Colic	1
Renal Disease	48
Rheumatism (chronic)	27
Retinal Hæmorrhage	2
Rhinitis (chronic)	10
Sciatica	2
Syphilis	32
Trigeminal Neuralgia	2
Urethral Stricture	9
Varicocele	1
Vesical Tuberculosis	1
Xeroderma Pigmentosa	1

Discharged :—

Efflux of time ...	1419
Further treatment unnecessary ...	31
Illness ...	36
Unsuitable for treatment	68
Urgent private affairs	91
	<hr/>
	1645

Average length of period under treatment of all patients discharged, about $20\frac{1}{2}$ weeks.

Re-admitted ... 182

After-History :—

	per cent.
Abstaining ...	about 40
Improved ...	6
Not improved ...	22
Insane ...	2
No news obtainable or dead ...	22
Discharged unsuitable for treatment or transferred elsewhere	6

ADMISSIONS AND DISCHARGES OF PATIENTS DURING YEAR ENDING 31st JANUARY, 1930.

Undischarged Jan. 31st, 1929, under Inebriates Act	4	Discharged under Inebriates Act ...	6
„ Private Patients	10	Discharged, Private Patients	100
Admitted under the Act	5	Undischarged Jan. 31st, 1930, under Act	3
„ as Private Patients	100	Undischarged, Private Patients	10
	<hr/>		<hr/>
Total	119		119

DALRYMPLE HOUSE, RICKMANSWORTH, HERTS.

Telegrams : " CEDARS, Rickmansworth." Telephone : 16 Rickmansworth.

LICENSED UNDER THE INEBRIATES ACTS, 1879-99.

Train Service from London : L.N.E. Ry. (Marylebone), half-an-hour ; Met. Ry. (Baker St.), and L.M.S. Ry., via Watford.

Dalrymple House is in the Uxbridge Road, and is 10 minutes walk from the joint Great Central and Metropolitan Railway Station, where Cabs are obtainable, and 15 minutes walk from the London and North Western Railway Station, where Cabs can sometimes be obtained.

By road, 20 miles from London, 4 miles from Watford, and $7\frac{1}{2}$ miles from Uxbridge.

Established in 1883 for the treatment of gentlemen suffering from alcoholism or a drug habit who are desirous of a cure, by an Association of prominent Churchmen, Medical men, Members of Parliament, and others interested in the Temperance question. Profits, when any, are spent on improvements for the benefit of patients.

The house is surrounded by about six acres of charming grounds, beautifully situated on a finely wooded terrace on the bank of the river Colne. There are twenty bedrooms for patients (each patient having a room to himself), a Reading room well supplied with newspapers and large Library, Writing room, Billiard room with full sized table, Dining room, and Dark rooms for photography. In the grounds there are a hard Tennis court, full-sized Croquet lawn, large Workshop, Concert room (organ and piano), and facilities for Quoits. Gravel soil. Hunting, Golf (Moor Park, Sandy Lodge, etc.) Cricket and Fishing can be obtained in the neighbourhood.

Patients received PRIVATELY also voluntarily UNDER THE ACT. The insane or those suffering from phthisis or infectious diseases cannot be received.

TREATMENT.—Alcohol Cases.—Alcohol is given at first to those who require it ; after the first two or three days it is rarely demanded.

In Drug Cases.—The almost invariable rule is gradual reduction.

Further treatment, which varies according to the case, condition, cause, complicating complaints, etc., is carried out ; the aim of treatment being to restore a man to health as rapidly as is consistent with a minimum of discomfort, to help him to exercise self-control and to cultivate his power of resistance, and to make him realise that part of his cure lies in his own hands and that total abstinence from alcohol and drugs is an absolute necessity.

The period of treatment varies according to the case, duration of trouble, state of mental and physical health, and amount of existing will power; it is generally impossible to determine this point until the case has been studied. Patients range from those of a strong constitution with a quite recently contracted habit, who require merely three or four weeks to set them up again, to others who have been drink sodden for years, periodically or continuously, for whom a year or more is necessary before it can be hoped that self-control can be established.

Generally speaking a two to three months' treatment is essential, while the longer periods are for the more severe conditions.

Occupations and games, preferably outdoor, are encouraged, and it is almost invariably found that he who busies himself and occupies his time, increases his chance of success, and incidentally adds to his enjoyment of life.

With regard to liberty to leave the grounds, patients are treated individually. In the case of some, a considerable amount of freedom may be safely given a few days after admission, and the large majority can be given parole after two or four weeks' residence.

PRIVATE PATIENTS and those UNDER THE ACT.—There is no distinction made as regards Rules, Terms, Accommodation, Diet, etc., between these classes.

Those who place themselves under the Act must remain in residence until the expiration of the period signed for, unless previously discharged or permitted to go away on leave of absence under the Act.

Private patients can leave when they wish.

METHOD OF ADMISSION UNDER THE ACT.—The patient must sign a request for admission, for any period not exceeding two years, in the presence of a Stipendiary Magistrate, or, better still, and without any publicity, before any Justice of the Peace, at his private house or elsewhere. Two persons (of either sex—relatives are quite eligible) must sign a Statutory Declaration, and this can be done before any Justice of the Peace or any Commissioner for Oaths. There is no necessity for the three signatures to be made at the same time or place, one or all can be signed at Rickmansworth if preferred.

There is, of course, a very natural objection on the part of most persons to the signing away of liberty of action for an indefinite or a fixed period, but there are many who are far too optimistic in their judgment of their own cases, in too much of a hurry to get well quickly, whose impulses and very natural desire to return to their ordinary life and vocation outweigh the caution that should be adopted in dealing with an issue where health, fortune and life are at stake. These persons are not fit judges as to the period when rehabilitation of self-control is sufficiently established, and the

settlement of such a question should be placed beyond their decision, while, of course, their arguments, views and their special circumstances should receive due consideration.

It is frequently preferable that the signature under the Act should be for a period in excess of that considered in all probability sufficient. A discharge can at any time be applied for and obtained, if such a course is advisable, or when urgent private affairs necessitate a premature termination of treatment; or a leave of absence can be granted, under which the patient is permitted to live elsewhere on the condition that he abstains from alcohol; should he not keep this condition his leave of absence will be cancelled. This leave is most useful in certain circumstances and is a valuable after treatment method of practically discharging a patient, and yet keeping in touch with him.

Hours for Meals :—Breakfast, 9; Luncheon, 1.30; Tea, 4; Dinner, 7.

TERMS :—First week, £8.8.0; subsequently £6.6.0. a week.

All fees are payable quarterly, monthly or weekly in advance.

If on arrival, or subsequently, the applicant is found to be ineligible for admission, or unsuitable for treatment, the payment in advance, or a proportionate part thereof, in accordance with the above sliding scale, will be refunded. The Committee reserves to itself the right to refuse admission to any applicant. One week's notice required before termination of residence.

EXTRAS.—Special nursing attendance (rarely required), fires or meals in bedroom, personal laundry, medicine and treatment other than that employed for the cure of the alcohol or drug habit, postages, necessities and personal comforts required by the patient.

PERSONAL EXPENSES.—A sum (say £5) should be deposited for laundry tobacco, postage, etc.

CLOTHING.—No dress clothes necessary. All linen should be plainly marked.

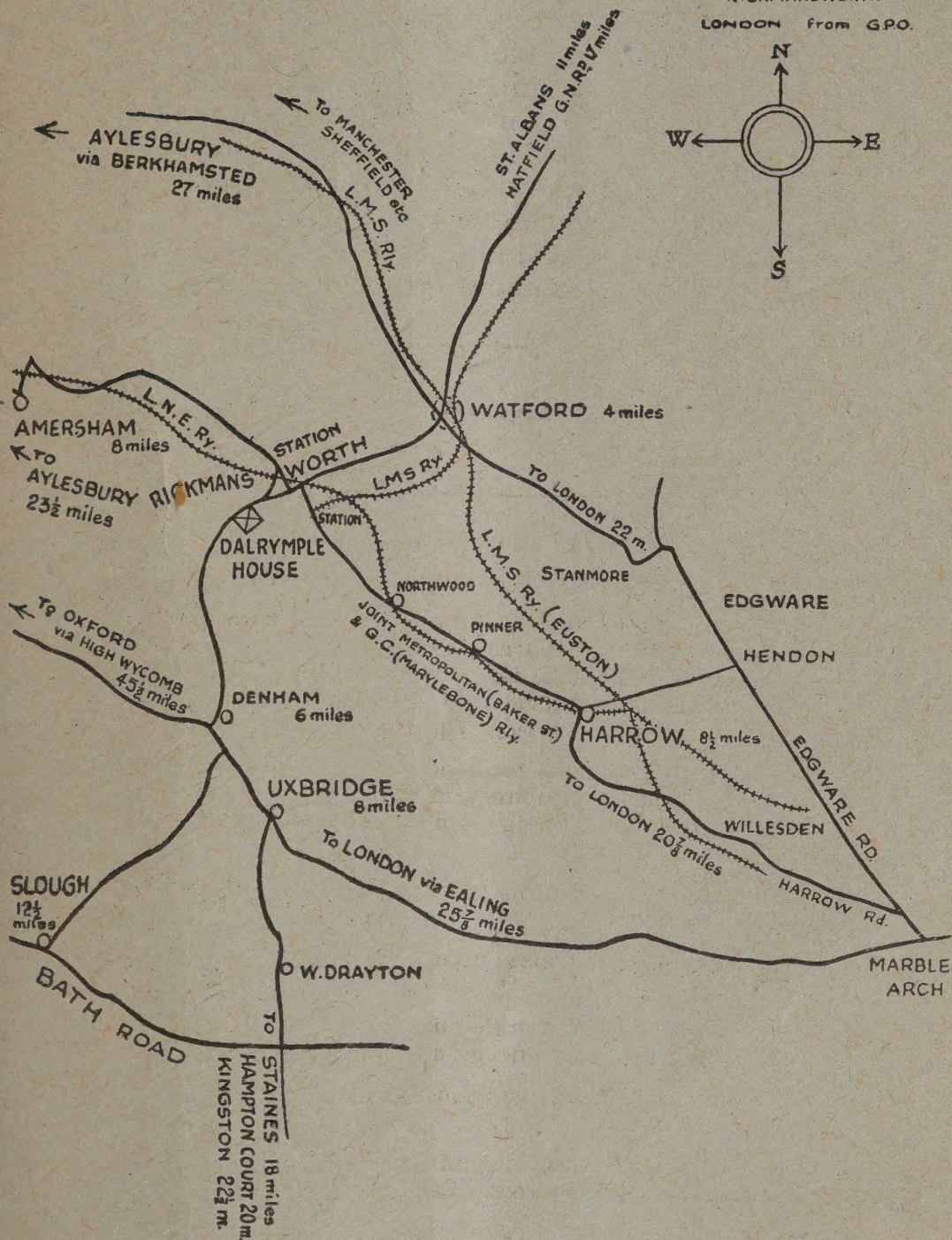
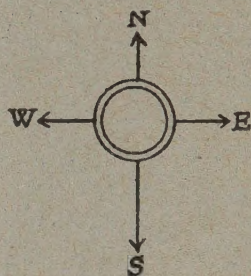
TRAVELLING.—If required a male nurse can be obtained to accompany the patient, his usual charges being one guinea a day and travelling expenses.

VISITORS (duly authorised relations and friends) can call between the hours of 10 a.m. and 6 p.m.

DIVINE SERVICE.—There are within a few minutes walk places of worship of various denominations, including a Catholic Church.

"Statutory Declaration," "Request for Reception" forms, and any other particulars may be obtained from the Resident Medical Superintendent.

Mileage counted as from
 RICKMANSWORTH.
 LONDON from G.P.O.



PRINTED BY
WATFORD PRINTERS LTD.
58 VICARAGE ROAD
WATFORD